

## SHIELDS FLEET 9 NEWPORT – SAIL INVENTORY CARD

Boat Name: \_\_\_\_\_ Hull #: \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Business phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

Email Address \_\_\_\_\_

Sail Type	Acquisition Date	Sailmaker	Measurer's Name	Measurer's Signature
Main				
Jib				
Spinnaker				

Fax or Mail a copy of this form to your  
Fleet Captain whenever an entry is added

\_\_\_\_\_  
Owner's signature certifies the record above is true.